OCT 0 7 2005

Atty Docket No. 021989-000211US

PTO FAX NO.: 1-571-273-8300

ATTENTION:

Examiner Z. Lucas

Group Art Unit 1648

OFFICIAL COMMUNICATION

FOR THE PERSONAL ATTENTION OF

EXAMINER Z. Lucas

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of George H. Lowell, et al., Application No. 09/938,406, filed August 21, 2001 for PROTEIN AND PEPTIDE VACCINES FOR INDUCING MUCOSAL IMMUNITY are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

- 1. Form PTO/SB/21
- Request For Withdrawal As Attorney Or Agent And Change Of Correspondence Address

Number of pages being transmitted, including this page: 3

Dated: October 7, 2005

Timothy S Parker

PLEASE CONFIRM RECEIPT OF THIS PAPER BY RETURN FACSIMILE AT (858) 350-6111

TOWNSEND and TOWNSEND and CREW LLP Two Embarcadero Center, Eighth Floor San Francisco, CA 94111-3834 Telephone: 858-350-6100

Fax: 415-576-0300

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				Application Number		09/8	38,406				1
TRANSMITTAL			Filing Date		August 21, 2001			·	1		
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(to be used for all correspondence after initial filing)			ing)	Exeminer Name		Z. Lucas		00=	1 .		
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ENCLOSURES (Check all that apply)								ļ			
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Printed name	Scott	E. McPherson	,							, ,	
Date October 7, 2005				Reg. No. 53,30		53,307	53,307				
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I hereby certify October 7, 2005.	that this o	correspondence is	being fa	csimile transmitted to t	he Patent a	und Tr	ademark C	Office, Fa	x No. 1-571-2	273-8300 on	
Signature		<u> </u>		Tuingthy S.	Pa la						
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Typed or printed name Timothy S. F		Timothy S. Pa	IFKOF '				Date	October 7,	2005		

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF **CORRESPONDENCE ADDRESS**

		<u>_P10/58/83 (04-</u> 05	
Application Number	09/938,406		
Filing Date	August 21, 2001		
First Named Inventor	LOWELL, George H.		
Art Unit	1648		
Examiner Name	Lucas Zacharlah		
Attorney Docket Number	021989-000211US		

P.O.	nmissioner . Box 1450 candria, VA	for Patents 22313-1450						
Pleas	Please withdraw me as attorney or agent for the above identified patent application, and							
	all the attorneys/agents of record.							
	all the attorneys/agents (with registration numbers) listed on the attached paper(s), or							
\boxtimes	all the attorneys/agents associated with Customer Number 20350							
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.								
The reaso	ns for this req	quest are: Client requests to trans	sfer matter	•				
	CORRESPONDENCE ADDRESS							
1. 🔲 🏗	1. The correspondence address is NOT affected by this withdrawal.							
2. 🔲 Cł	2. Change the correspondence address and direct all future correspondence to:							
The	The address associated with Customer Number:							
OR .	OR							
	Firm or Individual Name Seed Intellectual Property Law Group PLLC							
Address 710 Fifth Avenue Suite 6300								
City		Seattle State WA			Zip 98104			
Country		US	· · · · · · · · · · · · · · · · · · ·					
Telephone		206-622-4900		Email info@seedIP.com				
Signature	Signature SM 5. M. J. Marson							
Name	Scott E. Mc	herson		Registration No. 53,307				
Date	October 7, 2005			Telephone No. 858-350-6100				
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.								

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